

From the Editor's Desk

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High-quality end-of-life care is an important aspect of high-quality healthcare and will be an increasingly common aspect of healthcare overall as baby boomers enter the age group traditionally considered geriatric. This special issue of *The Ochsner Journal* contributes different perspectives to providing such care, and as guest editor for this issue, I invite you to provide additional perspectives and concerns by writing letters to the editor.

The editorial comments from our Chief Medical Officer, Chief Nursing Officer, and a senior oncologist help set the tone for this issue. Let me highlight Dr Bisordi's comments on the challenge of finding quality metrics to monitor end-of-life care as an excellent topic for discussion on the *Journal's* letters page.

I am very grateful to Karen Pinsky and Lisa Tompkins for personal accounts that remind us that end-of-life care is a highly personal issue. One of the often emotionally charged decisions along the way is deciding not to call a code when the heart stops beating if a good result is unlikely, and my article on the language used in orders discusses this.

Dr White reviews the special challenges when end-of-life care happens at the beginning of life. Dr Vazquez and Mr Santone review many of the psychosocial issues in end-of-life care and the rights of patients with mental illness. Ms Hebert, Mr Moore, and Ms Rooney explore the role of the nurse as advocate during end-of-life care; as many know, nursing interactions are often critical to the emotional support needed by both patients and family members.

Ms Sullivan and Ms Koppel inform us of the legal issues surrounding end-of-life care in Louisiana. Although some of these provisions are unique to Louisiana, most are similar to those in other states.

Dr Mitchell's perspective from Australia reminds us that the search for high-quality end-of-life and palliative care goes far beyond the United States.

Dr Townsend discusses how to handle acute surgical emergencies near the end of life, a quandary that does not always have easy answers. Dr Abi-Samra reviews the options at the end of life involving cardiac implantable electrical devices and highlights the latest recommendations from his professional society. Our palliative care team explains its role at the end of life; this resource is increasingly being used to provide high-quality care as the end approaches. Dr Vogel tells us what we should know about hospice, clearing away common misunderstandings. Chaplain Thomas reviews bioethics resources that may be useful in our work.

I hope this special edition can be the start of a dialogue in many ways. For readers, please consider writing a letter to the editor if you have a perspective or comment that may add to the conversation. Also, those on a medical staff may consider whether this special edition could be a useful starting point for discussions about updating end-of-life policies where you practice.

We will continue this conversation in 2012 with a bioethics column in each quarterly issue of *The Ochsner Journal*. We encourage your engagement and feedback.